March 21, 2016 7:00 P.M.
JONES COUNTY BOARD OF COMMISSIONERS
REGULAR MEETING
JONES COUNTY AGRICULTURAL BUILDING, 110 MARKET STREET
TRENTON, NC 28585
MINUTES

#### **COMMISSIONERS PRESENT:**

Zack Koonce, Chairperson Frank Emory, Vice-Chairperson Joseph Wiggins, Commissioner Sondra Ipock-Riggs, Commissioner

#### **OFFICIALS PRESENT:**

Franky J. Howard, County Manager Angelica Hall, Clerk

#### **COMMISSIONERS ABSENT:**

Mike Haddock, Commissioner

The Chairperson called the meeting to order. Chairperson Zack Koonce gave the invocation. **MOTION** was made by Commissioner Joseph Wiggins, seconded by Commissioner Sondra Ipock-Riggs, and unanimously carried **THAT** the agenda be **APPROVED** as presented.

MOTION made by Commissioner Joseph Wiggins, seconded by Commissioner Sondra Ipock-Riggs, and unanimously carried THAT the minutes for Regular Meeting on February 15, 2016 be APPROVED.

#### **PUBLIC COMMENT PERIOD:**

No Public Comment

#### 1. REVISED CHILD HEALTH FEES

Mr. Wesley Smith, Health Director, provided the Board with an updated Fee Schedule. The revised Child Health Fee schedule included comparison from Pamlico and Green County. The base line is the Medicaid rate and most are increased by 25%. Mr. Smith also explained to the Board that the Health Department uses a sliding fee schedule which also provides assistance to clients to reduce their rate at the time of visit. MOTION made by Commissioner Frank Emory, seconded by Commissioner Sondra Ipock-Riggs and unanimously carried THAT the revised Health Department Fee Schedule be APPROVED. A copy of the revised child health fee schedule is marked EXHIBIT A and is hereby incorporated and made a part of the minutes.

#### 2. CAPTIAL REQUEST

Mr. Wesley Smith, Health Director, submitted a capital request to the Board. The Health Department recently received a Public Health grant for preparedness and readiness for Ebola Virus Disease. Mr. Smith explained to the Board that they have funding to cover the request of 4 Micosoft Pro Tablets. This purchase will not include any county funds. MOTION made by Commissioner Joseph Wiggins, seconded by Commissioner Frank Emory and unanimously carried THAT the capital request be APPROVED. A copy of this request is marked EXHIBIT B and is hereby incorporated and made a part of the minutes.

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#### 3. LIBRARY BOARD APPOINTMENT

Mr. Franky Howard presented the Board with a Library Board Appointment. The Library Board is requesting to reappoint Mrs. Roberta Jarman. **MOTION** made by Commissioner Joseph Wiggins, seconded by Commissioner Sondra Ipock-Riggs and unanimously carried **THAT** the Board appointment be **APPROVED**.

#### 4. TAX REFUND REQUEST

Mr. Franky Howard presented the Board with Tax Refund requests. The refunds have been verified by Sam Croom. **MOTION** made by Commissioner Joseph Wiggins, seconded by Commissioner Frank Emory and unanimously carried **THAT** the Tax Refund request be **APPROVED**. A copy of this request is marked **EXHIBIT** C and is hereby incorporated and made a part of the minutes.

#### 5. BUDGET AMENDMENTS

Mr. Franky Howard presented the Board with Budget Amendments for approval. MOTION made by Commissioner Frank Emory, seconded by Commissioner Sondra Ipock-Riggs and unanimously carried **THAT** the Budget Amendments 6-24 be **APPROVED**. A copy of the budget amendments is marked **EXHIBIT D** and is hereby incorporated and made a part of the minutes.

#### **COUNTY MANAGER'S REPORT**

Mr. Franky Howard explained to the Board that there will need to be a Public Meeting Scheduled in order for the County to participate in the CDBG Program. This meeting is tentatively scheduled to take place at the first Monday meeting in April. Mr. Howard also reminded the Board that the Committee of 100 Annual Banquet is Thursday March 31 at 6:00 p.m.

#### **COMMISSIONER'S REPORTS**

Commissioner Sondra Ipock-Riggs stated she received over 20 calls of complaints about the land fill dumping in Pollocksville.

Chairperson Zack Koonce stated that The DSS Board had a 4 member board at their meeting and hope to have a chairperson by April.

#### PUBLIC COMMENT

No Public Comment

**MOTION** made by Commissioner Joe Wiggins, seconded by Commissioner Frank Emory, and unanimously carried **THAT** the meeting be **ADJOURN** at 7:37 p.m.

Zack Koonce Chairman

Angelica Hall
Clerk to the Board



# Jones County Health Department

418 Hwy 58 North, Unit C Trenton, NC 28585

Phone: (252) 448-9111

Wesley P. Smith

Fax: (252) 448-1443

Health Director

# Jones County Health Department Additions/Revisions to Clinic Services Fee Schedule (Child Health) (Revised March 21, 2016)

Service	CPT Code	Current Fee	Proposed Fee
Preventative/New:			
Less than 1 year old	99381	103.50	133.00
Ages 1-4	99382	103.50	145.00
Ages 5-11	99383	103.50	145.00
Ages 12-17	99384	194.35	175.00
Ages 18-39	99385	192.05	182.00
Preventative/Established:			
Less than 1 year old	99391	103.50	127.00
Ages 1-4	99392	103.50	133.00
Ages 5-11	99393	103.50	148.00
Ages 12-17	99394	190.17	172.00
Ages 18-39	99395	190.75	170.00
Dental Procedures:			
Oral Evaluation/Instructions	D0145	42.64	58.00
Dental Varnishing Application	D1206	36.26	52.00
Vision Screening:	99173	3.86	10.00
Nutrition Screenings:			
Medical Nutrition Counseling - Individual	97802	18.17	41.00
Medical Nutrition Reassessment	97803	18.17	32.00
Medical Nutrition Counseling – Group	97804	New Fee	11.00
Developmental Screenings:			
Ages Stages Questionnaire (ASQ)	. 96110	11.75	18.00
CRAFTT – 15 mins.	99408	New Fee	35.00
CRAFTT – 30 mins.	99409	New Fee	65.00
Health Risk Assessment(s)	99420	9.36	19.00
Laboratory Services:	·		
Removal of Foreign Body	10120	New Fee	119.00
Venipuncture	36415	10.12	11.00
Capillary Blood Collection	36416	New Fee	13.00
Urinary Catheter Insertion	51701	New Fee	67.00
Ear Irrigation – Cerumen Removal	69210	75.75	68.00
Respiratory:			
Albuterol Solution	J7613	New Fee	32.00
Peak Flow	94010	New Fee	27.00
Nebulizer Treatment	94640	New Fee	19.00
Evaluate Patient Use – Nebulizer	94664	12.87	22.00

CPT Code	Current Fee	Proposed Fee
94760	2.06	3.00
	11.29	11.00
92551	16.56	18.00
	·	24.00
99406	New Fee	12.00
		24.00
10060	96.68	112.00
		66.00
		60.00
		7.00
		127.00
	13.50	12.00
		27.00
<u> </u>		275.00
7,502		
90633	New Fee	23.00
ļ., <u></u>		108.00
		28.00
		25.00
· · · · · · · · · · · · · · · · · · ·		149.00
		178.00
		17.75
		17.75
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		17.75
		285.00
		123.00
	New Fee	76.00
	New Fee	110.00
		48.00
		87.00
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		17.00
		21.00
		58.00
		25.00
		24.00
		40.00
		90.00
		73.00
		56.00
		91.00
		129.00
	CPT Code 94760 99070  92551 92567  99406 99407  10060 11200 17000 17003 17110 84702 93000 99502  90633 90636 90645 90645 90647 90649 90651 90657 90657 90658 90670 90672 90672 90675 90676 90680 90681 90696 90698 90700 90702 90703 90707 90713 90714 90715 90716 90723 90733 90734	94760 2.06 99070 11.29  92551 16.56 92567 21.03  99406 New Fee 99407 New Fee  10060 96.68 11200 72.95 17000 New Fee 17110 161.45 84702 13.50 93000 31.89 99502 199.64  90633 New Fee 90645 32.03 90647 32.03 90647 32.03 90649 146.43 90651 New Fee 90657 17.75 90658 17.75 90658 17.75 90670 New Fee 90672 New Fee 90672 New Fee 90675 148.35 90676 182.77 90680 New Fee 90696 New Fee 90696 New Fee 90698 New Fee 90698 New Fee 90698 New Fee 90700 18.88 90702 17.14 90703 15.00 90707 56.26 90713 20.18 90714 15.00 90715 35.03 90716 96.24 90723 New Fee

Service	CPT Code	Current Fee	Proposed Fee
Zoster Vaccine	90736	New Fee	<i>175.00</i>
Hep B	90744	25.05	40.00
Hep B – Adult	90746	72.92	56.00

The above services were revised and/or added to the Jones County Health Department Clinic Services Fee Schedule, effective March 1, 2016. These changes to the Fee Schedule were approved by both the Jones County Board of Health and Jones County Board of Commissioners on the dates indicated below.

Chair, Jones County Board of Health	Date	
Chair, Jones County Board of Commissioners		

Child Health Fee Comparison (100%) - 1/27/16

		Medicaid			Sollars O Selb Hear	Revised Proposed
Office Visit	CPT Code	Reimbursement	Jones County Fees (Current Fees)	Not including Pamilco & Greene	molding Fairmed & Greene	Fee Effective 3/21/16
Preventative/New	00201	00.00	103.50	140.00	133.00	133.00
Less than 1 year old	99301	00.00	103.50	156.00	145.00	145.00
Ages 1-4	93382	90 00/154 00	103.50	156.00	145.00	145.00
Ages 5-11	99383	90.00/154.00	194.35	196.00	175.00	175.00
Ages 1.2-1/	93384	90.00/167.00	192.05	206.00	182.00	182.00
Ages 18-39	COCC					
Preventative/Established	2000	00 00	102 50	131.00	127.00	127.00
Less than 1 year old	99391	00.00	103.50	140.00	133.00	133.00
Ages 1-4	99397	30.00	103.50	148.00	148.00	148.00
Ages 5-11	99393	90.00/146.00	100.17	192.00	172.00	172.00
Ages 12-17	99394	90.00/146.00	150.17	190.00	170.00	170.00
Ages 18-39	99395	90.00/142.00	190.75	On not	Section Annual Sectio	
Dental Procedures	en e					
Oral Evaluation/ Instructions	D0145	36.35	42.64	65.00	58.00	58.00
Contact Variet Amplication	D1206	16.04	36.26	60.00	52.00	52.00
	99173	None	3.86	10.00	14.00	10.00
Vision Screening						
Nutritional Screening	27802	24 51	18.17	45.00	41.00	41.00
Medical Nutrition Counselling - Illuividual	20070	AA 10	1817	33.00	32.00	32.00
MNT - Reassessment	97803	44.77	10.4.1 (A.A.)	11.00	11.00	11.00
MNT - Group	97804	None	Not listed	77.00	APPENDING TO THE PROPERTY OF T	
Developmental Screenings						
Ages Stages Questionnaire (ASQ)	96110	8.75	11.75	18.00	23.00	18.00
CRAFIT 15 min	99408	30.73	Not listed	35.00	38.00	35.00
CRAFIT 30 min	99409	60.41	Not listed	65.00	76.00	65.00
Pediatric Sympton Checklist (PSC)	99420	8.14	9:36	22.00	19.00	19.00
HEADSS	=	11	=	11	11	
Autism MCHAT	=	2	11	ш	-	=
Edinhurah Assessment	=	н	=		=	1
Vandarhilt Assessment	=	11	2	=	2	
Vallacioni Valendant	z	11	=	11	<b>n</b>	=
GAPS Assessment	=	**	13	13	16	
occinco in a						
Eaboratory Services	10120	97.83	Not listed	119.00	121.00	119.00
Kemoval of Foreign over	36415	2.78	10.12	13.00	11.00	11.00
Venipuncture	36416	None	Not listed	13.00	20,00	13.00
Finger/Heel Stick	20110	01.07	Not listed	70.00	67.00	67.00
Urinary Cath insertion	10/15	20.12	200			

Child Health Fee Comparison (100%) - 1/27/16

Office Visit	CPT Code	Medicaid Reimbursement Rate (9/16/14)	Jones County Fees (Current Fees)	Not Including Pamlico & Greene	Including Pamilico & Greene	Fee Effective 3/21/16
	05000	50.75	75.75	75.00	68.00	98.00
Ear Irrigation - Cerumen Removal	03510	50.75				a company
Respiratory	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )		Not listed	32.00	32.00	32.00
Albuterol Solution	17613	None	NOT IISTED	22.20	30.00	27.00
Peak Flow	94010	76.37	NOI IISIEG	23.00	19.00	19.00
Nebulizer Treatment	94640	10.49	Not listed	23.00	00.61	22.00
Evaluate Pt use Nebulizer	94664	11.47	12.87	26.00	22.00	3.00
Pulse Oximetry	94760	2.13	2.06	4,00	3.00	20.00
Supplies and materials	99070	9.71	11.29	11.00	11.00	11.00
Looring Creaning						
nearing outcoming	92551	8.27	16.56	18.00	19.00	18.00
Tympanometry	92567	14.06	21.03	27.00	24.00	24.00
Talend Chimeoffing						
robacco counselling	99406	11.93	Not listed	12.00	13.00	12.00
	20156	23.05	Not listed	24.00	26.00	24.00
Bullasu	101					
Supplies Miscellaneous	00007	00.10	05.50	118.00	112.00	112.00
Simple Incision and Drainage	10060	80.14	30.00	00.00	66.00	66.00
Removal of Skin Tags	11200	None	72.95	00.00	27.00	00:00
Destruction of Lesions initial	17000	57.13	Not listed	00'09	7.00	90.00
Destruction of Lesions 2-14	17003	5.55	Not listed	8.00	7.00	00.7
Destruction of Lesions – Warts up to 14	17110	78.99	161.45	141.00	127.00	127.00
HG Ouantitative	84702	11.12	13.50	13.00	11.00	12.00
FKG-tracing and report	93000	16.85	31.89	32.00	27.00	27.00
Newborn Assessment Home Visit	99502	60.00	199.64	341.00	274.00	275.00
Henatitis A Vaccine	90633	None	Not listed	23.00	23.00	23.00
Henatitis A & B Vaccine (Twin Rix)	90636	89.50	Not listed	108.00	109.00	108.00
Hib – HBOC – Hib Titer	90645	19.67	32.03	32.00	28.00	28.00
Hib – Ped Vax	90647	19.68	32.03	26.00	25.00	25.00
Gardasil	90649	135.73	146.43	149.00	156,00	149.00
Gardasil 9 Valent	90651	None	Not listed	178.00	178.00	178.00
Influenza - 6 to 35 mos.	90657	None	17,75	17.75	17.75	17.75
Influenza - 3 years and above	90658	12.74	17.75	17.75	17.75	17.75
Prevnar 13	90670	None	Not listed	115.00	115.00	115.00
Influenza - Intranasal Use	90672	None	Not listed	17.75	17.75	17.75
Rabies - IM (Pre & Post Exposure)	90675	285.00	148.35	285.00	248.00	285.00
( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	90676	None	182.77	123.00	123.00	123.00

Child Health Fee Comparison (100%) - 1/27/16

					一日 日本日本日本日本日本日本日本日本日本日本日本日本日本日本日本日本日本日本日
100		Jones County Fees	Not Including	Including Pamlico	Revised Proposed
_	CPT Code: Reimbursement Rate (9/16/14)	(Current Fees)	Pamilco & Greene	& Greene	3/21/16
18	90680 None	Not listed	76.00	76.00	76.00
18	90681 None	Not listed	110.00	110.00	110.00
18		Not listed	48.00	48.00	48.00
8		Not listed	87.00	87.00	87.00
106	90700 None	18.88	19.00	19.00	19.00
106	90702 None	17.14	17.00	17.00	17.00
90703	703 20.70	15.00	21.00	20.00	21.00
90707	707 41.02	56.26	60.00	58.00	58.00
90713	13 24.79	20.18	23.00	25.00	25.00
90714	14 19.25	15.00	24.00	24.00	24.00
90715	15 39.49	35.03	38.00	41.00	40.00
90716	16 86.42	96.24	90.00	95.00	90.00
90723	23 72.63	Not listed	73.00	76.00	73.00
90732	32 31.53	27.02	62.00	56.00	56.00
90733	33 90.50	Not listed	91.00	102.00	91.00
90734	34 106.87	119.57	129.00	130.00	129.00
90736	36 None	Not listed	175.00	175.00	175.00
90744	744 None	25.05	40.00	40.00	40.00
90746	46 55.20	72.92	26,00	56.00	56.00



## Jones County Health Department 418 Hwy 58 N, P. O. Box 216 Trenton, NC 28585

Phone: (252) 448-9111

Wesley P. Smith

Fax: (252) 448-1443

Health Director

# Jones County Health Department Additions/Revisions to Clinic Services Fee Schedule (Child Health)

Service	CPT Code	Current Fee	Proposed Fee
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Less than 1 year old	99381	103.50	140.00
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Ages 5-11	99383	103.50	156.00
Ages 12-17	99384	194.35	196.00
Ages 18-39	99385	192.05	206.00
Preventative/Established:			
Less than 1 year old	99391	103.50	131.00
Ages 1-4	99392	103.50	140.00
Ages 5-11	99393	103.50	148.00
Ages 12-17	99394	190.17	192.00
Ages 18-39	99395	190.75	190.00
Dental Procedures:			
Oral Evaluation/Instructions	D0145	42.64	65.00
Dental Varnishing Application	D1206	36.26	60.00
Vision Screening:	99173	3.86	10.00
Nutrition Screenings:			
Medical Nutrition Counseling - Individual	97802	18.17	45.00
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Medical Nutrition Counseling – Group	97804	New Fee	11.00
Developmental Screenings:			
Ages Stages Questionnaire (ASQ)	96110	11.75	18.00
CRAFTT – 15 mins.	99408	New Fee	35.00
CRAFTT – 30 mins.	99409	New Fee	65.00
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Laboratory Services:			
Removal of Foreign Body	10120	New Fee	119.00
Venipuncture	36415	10.12	13.00
Capillary Blood Collection	36416	New Fee	13.00
Urinary Catheter Insertion	51701	New Fee	70.00
Ear Irrigation - Cerumen Removal	69210	75.75	75.00
Respiratory:			
Albuterol Solution	J7613	New Fee	32.00
Peak Flow	94010	New Fee	27.00
Nebulizer Treatment	94640	New Fee	23.00
Evaluate Patient Use - Nebulizer	94664	12.87	26.00

Service	CPT Code	Current Fee	Proposed Fee
Pulse Oximetry	94760	2.06	4.00
Supplies & Materials	99070	11.29	11.00
Hearing Screenings:			
Audiometry	92551	16.56	18.00
Tympanometry	92567	21.03	27.00
Tobacco Counseling:			
Tobacco Cessation Counseling 3-10 mins.	99406	New Fee	12.00
Tobacco Cessation Counseling > 10 mins.	99407	New Fee	24.00
Supplies/Miscellaneous:			
Simple Incision & Drainage	10060	96.68	118.00
Removal of Skin Tags	11200	72.95	66.00
Destruction of Lesions Initial	17000	New Fee	60.00
Destruction of Lesions 2-14	17003	New Fee	8.00
Destruction of Lesions – Warts up to 14	17110	161.45	141.00
HCG Quantitative	84702	13.50	13.00
EKG Tracing and Report	93000	31.89	28.00
Newborn Assessment – Home Visit	99502	199.64	341.00
Immunizations:	77302	133.01	2.2.00
Hepatitis A Vaccine	90633	New Fee	23.00
Hepatitis A & B Vaccine (Twin Rix)	90636	New Fee	108.00
Hib – HBOC – Hib Titer	90645	32.03	32.00
Hib – Ped Vaccine	90647	32.03	26.00
Gardasil	90649	146.43	149.00
Gardasii 9 Valent	90651	New Fee	178.00
Influenza – 6 to 35 mos.	90657	17.75	17.75
Influenza – 3 years and above	90658	17.75	17.75
Prevnar 13	90670	New Fee	115.00
Influenza – Intranasal Use	90672	New Fee	17.75
Rabies – IM (Pre & Post Exposure)	90675	148.35	285.00
Rabies – ID (Pre & Post Exposure)	90676	182.77	123.00
Rotavirus	90680	New Fee	76.00
Rotavitus	90681	New Fee	110.00
	90696	New Fee	48.00
Kinrix  Diagram Lib. in (Pontonil)	90698	New Fee	87.00
Dtap – hib – ip (Pentacil)	90700	18.88	19.00
DtaP - Less than 7 years	90702	17.14	17.00
Diphtheria Tetanus (dT) – Less than 7 yrs.	90702	15.00	21.00
Tetanus	90707	56.26	60.00
Measles Mumps Rubella (MMR)	90713	20.18	23.00
IPV	90714	15.00	24.00
Tetanus Diphtheria (Td)	90714	35.03	38.00
tDap	90715	96.24	90.00
Varicella	90718	New Fee	73.00
Pediarix		27.02	62.00
Pneumovax 23	90732	New Fee	91.00
Meningococcal SC	90733		129.00
Menactra	90734	119.57	1 27.00

Service	CPT Code	Current Fee	Proposed Fee
Zoster Vaccine	90736	New Fee	175.00
Нер В	90744	25.05	40.00
Hep B – Adult	90746	72.92	56.00

The above services were revised and/or added to the Jones County Health Department Clinic Services Fee Schedule, effective March 1, 2016. These changes to the Fee Schedule were approved by both the Jones County Board of Health and Jones County Board of Commissioners on the dates indicated below.

Chair Jones County Poard of Health

1-28-2016

Date

Chair, Jones Chunty Board of Commissioners

Date

**EXHIBIT B** 



Angelica K. Hall, Clerk to the Board P.O. Box 340 Trenton, NC 28585 252-448-7571 Fax 252-448-1072 ahall@jonescountync.gov

# AGENDA REQUEST JONES COUNTY BOARD OF COMMISSIONERS

DATE OF MEETING:

March 21, 2016

REQUEST FROM (Department, agency, etc.): Health Department

PRESENTER'S NAME AND TITLE: Amy Carter, Public Health Educator II

PRESENTATION TIME NEEDED: 5 Minutes

LEGAL REVIEW REQUIRED: Yes

**⊠**No

DESCRIPTION OF AGENDA ITEM (need detailed information and funding source if applicable): Jones County Health Department received \$20,000 in funding from the NC Division of Public Health, Public Health Preparedness and Response Branch (PHP&R), to be used to enhance public health emergency preparedness planning and operational readiness for Ebola Virus Disease (EVD). The Health Department requested and was approved by PHP&R to use a portion of these funds to purchase four (4) Microsoft Pro 4 Tablets. The tablets will be used in the field for contact monitoring within Jones County in case of an Ebola or other disease of consequence event.

RECOMMENDED MOTION: Approve Jones County Health Department to use a portion of our Ebola Preparedness and Response (Activity 613) funding to purchase four (4) Microsoft Pro 4 Tablets at a cost of \$5,814.60 (less sales tax).

ARE THERE ANY ATTACHMENTS/BACKUP INFORMATION? (Only one copy of the attachment is needed)  $\underline{\mathbf{Yes}}$ 

(1) Copy of Agreement Addendum for Activity 613 - Ebola Preparedness & Response

(2) Copy of letter dated 3/8/16 to DPH PHP&R requesting approval to use Activity 613
Funds to Purchase Tablets

(3) Copy of email dated 3/14/16 from DPH PHP&R approving use of Activity 613
Funds to Purchase Tablets

DEADLINES ASSOCIATED WITH THIS AGENDA ITEM: Yes, funds must be spent before May 31, 2016

PHONE NUMBER:

252-448-9111 ext. 3017

EMAIL ADDRESS:

acrompton@jonescountync.gov

All agenda items must be received no later than noon the Monday before the meeting (one week in advance). Regularly scheduled board meetings are held the first Monday of the month at 8:30 a.m. and the third Monday of the month at 7:00 p.m. The board travels for some third Monday meetings. Please refer to the Jones County website or call Angelica K. Hall for meeting locations.



# Jones County Health Department

418 Hwy 58 North, Unit C Trenton, NC 28585

Phone: (252) 448-9111

Wesley P. Smith

Fax: (252) 448-1670

Health Director

March 8, 2016

Niki Marshall, Operations Manager Office of Public Health Preparedness & Response N. C. Division of Public Health 1902 Mail Service Center Raleigh, NC 27699-1902

Re: AA-613 Ebola Funding Spending Request

Dear Ms. Marshall:

Please find attached a quote in the amount of \$5,814.60 from Best Buy for four (4) Microsoft Pro 4 Tablets. We are requesting the use of AA-613 funds to purchase these tablets for mobile use in the field for contact monitoring within our county in case of an Ebola or other disease of consequence event.

Jones County Health Department will have sufficient funds remaining to maintain Health Department preparedness and Ebola response operations and activities through the end of the contract period.

Please do not hesitate to contact me should you have any questions.

Wesley P Smith

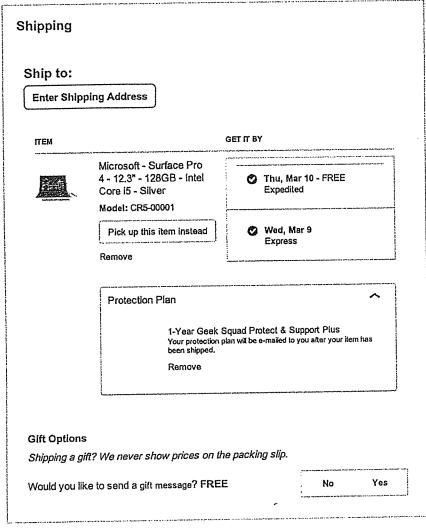
Health Director

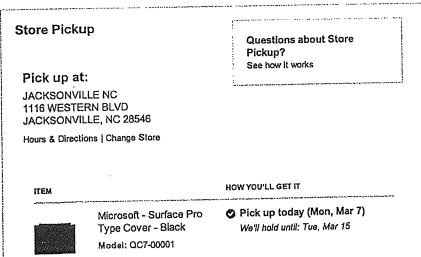
Jones County Health Department

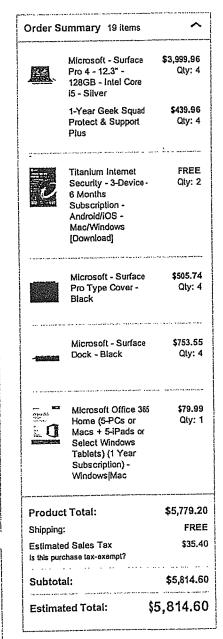
Return to Cart

Your Info > Delivery Info > Payment > Mobile Setup > Review & Place Order > Order Complete

# **Confirm Your Delivery Options**







3/7/2016

Confirm Delivery Options - Best Buy

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Office has	Microsoft Office 365 Home (5-PCs or Macs + 5-iPads or Select Windows Tablets) (1 Year Subscription) - Windows Mac	Select a store i	to see availab	oility.
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## **Digital Delivery**

ITEM

HOW YOU'LL GET IT



Titanium Internet
Security - 3-Device - 6
Months Subscription Android/iOS Mac/Windows
[Download]
Remove

BestBuy.com account required. Download instructions are usually emailed within 30 min.

Nonreturnable, Download in US only.

# Get Order Updates by Text

#### Your Cell Phone Number

Optiona

You'll get texts for each item in your order. See when you'll get texts

Message and Data Rates May Apply. See full Best Buy Order Status terms and conditions. For help, text HELP to 332211. To opt out, text STOP to 332211.

Commissioners' Minutes

March 21, 2016

Book 12 Page 356

3/15/2016

Jones County Government Mail - Prior Approval Request- March 8, 2016

Email correspondence to and from this address is subject to the

North Carolina Public Records Law and may be disclosed to third parties.

#### Twitter YouTube

Unauthorized disclosure of juvenile, health, legally privileged, or otherwise confidential information, including confidential information relating to an ongoing State procurement effort, is prohibited by law. If you have received this e-mail in error, please notify the senderimmediately and delete all records of this e-mail.

3/15/2016

Jones County Government Mail - Prior Approval Request- March 8, 2016



Wesley Smith <wsmith@jonescountync.gov>

# Prior Approval Request- March 8, 2016

1 message

Sallah, Stepheria <stepheria.sallah@dhhs.nc.gov>
To: "wsmith@jonescountync.gov" <wsmith@jonescountync.gov>

Mon, Mar 14, 2016 at 5:57 PM

Dear Mr. Smith,

This email is in response to your prior approval request to utilize 613 funds in the amount of \$5,814.60 (less sales tax) to purchase four (4) Microsoft Pro 4 Tablets. These tables will be used for in the field for contact monitoring within your county in case of an Ebola or other disease of consequence event. This request has been reviewed and is hereby approved.

Sincerely,

Stepheria

# Stepheria Hodge Sallah, MPH, CHES

Sub-recipent Grants Monitor

Division of Public Health, Public Health Preparedness & Response (PHP&R)

North Carolina Department of Health and Human Services

919 715 1411 office

919 280 2306 mobile

919 715 2246 fax

stepheria.sallah@dhhs.nc.gov

225 N McDowell St

1902 Mail Service Center

Raleigh, NC 27699-1902



Nothing Compares \_\_\_\_

3/7/2016 Confirm Delivery Options – Best Buy

To continue, enter your address and select a store.

Continue

Continue

<sup>1</sup>My Bast Buy <sup>TM</sup> point amounts shown are based on the product total and assume 1 point awarded per \$1 spent. You may receive more points if you're an Elite or Elite Plus member, if you use a Best Buy credit card and choose no financing (Standard Credit), or if a special promotion is in effect. You may receive fewer points if your order includes items that do not qualify for points. Points are not awarded on sales tax; purchases made with gift cards, reward certificates or promotional codes; and other excluded items noted in the My Best Buy Program Terms, Points are not awarded if you choose financing with your Best Buy credit card. Points will post to a member's account after 15 days from purchase date, shipment date, or delivery date.

#### HAVE QUESTIONS?

Check out our Help Center.

See Our Help Center

# RETURNS & EXCHANGES

Need to return it? No problem.

See Our Return Promise

#### PRICE MATCH GUARANTEE

We won't be beat on price.

See Price Match Guarantee

Conditions of

Interest-Based

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Use

Privacy Ads

Español | Mobile Site

Prices and offers are subject to change. © 2015 Best Buy. All rights reserved. BEST BUY, the BEST BUY logo, the Tag Design, MY BEST BUY, and BESTBUY.COM are trademaks of Best Buy and its affiliated companies.

3/7/2016

Confirm Delivery Options - Best Buy Ship this Item instead .. Remove Who will pick up this item? I will Someone else will Additional Pickup Options Would you like to speak with a Best Buy Customer No Yes Specialist about this item when you pick it up in the store? Would you like a gift receipt? Yes No Would you like to send a gift message? FREE No Pick up at: Select a Store HOW YOU'LL GET IT ITEM Microsoft - Surface Select a store to see availability. Dock - Black Model: PD9-00003 Ship this Item Instead Remove Who will pick up this item? Someone else will Additional Pickup Options Would you like to speak with a Best Buy Customer Yes No Specialist about this Item when you pick it up in the store? Would you like a gift receipt? Yes Would you like to send a gift message? FREE No Pick up at:

Select a Store

# Division of Public Health Agreement Addendum FY 15-16

Page 1 of 3

Jones County Health Department Local Health Department Legal Name  613 Ebola Preparedness and Response Activity Number and Description  07/01/2015 - 05/31/2016	DPH Section/Branch Name  Nikki Marshall, (919) 715-1389, nikki marshall@dhhs.nc.gov  DPH Program Contact (name, telephone number with area code, and email)
Activity Number and Description  07/01/2015 - 05/31/2016	nikki i marshall@dhhs.nc.gov  DPH Program Contact
Activity Number and Description  07/01/2015 - 05/31/2016	DPH Program Contact
07/01/2015 - 05/31/2016	(name, telephone number with area code, and email)
	DPH Program Signature Date
Service Period	DPH Program Signature Date (only required for a negotiable agreement addendum)
08/01/2015 - 06/30/2016	(any organization of the control of
Payment Period	
Original Agreement Addendum	a carrier
Agreement Addendum Revision # (Please do no	ot put the Budgetary Estimate revision #'here.)
Centers for Disease Control and Prevention (CDC Carolina, Public Health Preparedness and Respons strategically assist the public health authority with	se (PHP&R) has identified systematic approaches to the reduction of threats, responsiveness to travelers, se potentially exposed individuals and the state of a limplementing public health plans to better care for
II. Purpose: The purpose of this Activity is to enhance public hoperational readiness for Ebola Virus Disease (EV	nealth emergency preparedness planning and TD).
and treatment plans of the healthcare coalition worker safety.	in shall include monitoring, reporting, unisportation is, communications and information shaing, and
2. Develop an Isolation and Quarantine Plan to in EVD by May 30, 2016	6/5/15
Health Director Signature (use blue ink)	Date
Local Health Department to complete:  (If follow up information is needed by DPH)  Email address:	

Page 2 of 3

- 3. Collaborate with community partners including hospitals and law enforcement to convene and facilitate:
  - a. One informational sharing session and one training session, meeting, webinar, and/or conference call for responding to EVD by December 31, 2015.
  - b. One informational sharing session and one training session, meeting, webinar, and/or conference call for responding to EVD by April 30, 2016.
- 4. Develop a Personal Protective Equipment (PPE) Plan to include processes and procedures for responding to EVD by May 31 2016.
- 5. Plan and facilitate Personal Protective Equipment (PPE) training for staff and partners for responding to EVD by April 30, 2016.
- 6. Develop a Risk Communication Plan to include processes and procedures for responding to EVD by May 31, 2016.

# IV. Performance Measures/Reporting Requirements:

The Local Health Department shall:

- Provide data as requested by PHP&R that supports reporting for the Performance Measures needed by the CDC Public Health Emergency Preparedness Cooperative Agreement. The essential data elements are found in the CDC Public Health Preparedness Capabilities and subsequent updates from CDC. Preparedness activities will be aimed at achieving, at minimum, locally applicable priority elements as defined in the CDC Public Health Preparedness Capabilities document.
- 2. Complete and submit the following reports:
  - a. A copy of the Local Health Department's Ebola Concept of Operations plans for its local jurisdiction by June 30, 2016;
  - b. Monthly Expenditure Monitoring Reports (EMRs).
  - c. Mid-year activities and progress report by January 15, 2016 and final report by June 30, 2016 to the PHP&R Performance Measures Tracker Database.
- 3. Provide all plans and documents for review by PHP&R staff when requested. Plans and other documents must be consistent with state and federal requirements and must be specific to your local public health area.

## V. Performance Monitoring and Quality Assurance:

PHP&R will provide technical support to the Local Health Department in preparedness planning, training, and exercising. Templates, best practices, and conferences will be provided on an ongoing basis.

PHP&R's Subrecipient Grants Monitor or PHP&R Program Manager's designee will review reports from PHP&R's Progress Check Database and may schedule and conduct on-site visits with the Local Health Department to assess compliance with CDC grant and Agreement Addendum requirements, financials, and/or provide consultative assistance.

Inadequate performance on the part of the Local Health Department directly impacts the capacity of North Carolina's ability in overall preparedness. In the event that performance is deemed inadequate or non-compliant, PHP&R reserves the right to identify the county as "high risk," which may result in a reduction or suspension of funds.

Page 3 of 3

While not necessarily an indicator of inadequate performance, a Local Health Department's inability to spend allocated funds will result in an assessment and potential recall of funds for re-allocation to other local health departments.

## VI. Funding Guidelines or Restrictions: (if applicable)

Funds may not be used to purchase meals and/or snacks. Equipment and supply purchases exceeding \$2,500 for single or multiple items must receive prior written approval from PHP&R. (See Consolidated Agreement, Section B, 14.b.—Funding Stipulations.)

Page 1 of 2

DPH-Aid-To-Countles

For Fiscal Year:15/16

DPH-AID-10-L	) ز	u	urie	<u> </u>	-or i-iecai	Year:15/1
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04 Anson		1	0	20,000	20,000	
D2. Appalachia	ın	*	0	23,000		
07 Beaufort		*	0	20,000	20,000	20,000
09 Bladen		*	0	20,000		
10 Brunswick		*	0	20,000		20,000
11 Buncombe		*	0	20,000	20,000	20,000
12 Burke		*	. 0	20,000		20,000
13 Cabarrus		*	0	20,000	20,000	
14 Caldwell		*	0	20,000	20,000	20,000
16 Garteret		*	0	20,000	20,000	20,000
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26 Cumberland		1	0	20,000	20,000	20,000
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29 Davidson	1	1	0	20,000		20,000
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Budgetary Estimate Number: 0

Page 2 of 2

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Julia Hudrell 927/15	Mucros Nil 5-29-16
Sign and Date DPH Contracts Office Section Chief	Sign and Date - DPH Budget Officer
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**EXHIBIT C** 

Date:

March 11, 2016

Taxpayer(s):

North Carolina Agricultural Foundations Inc.

Refund To:

North Carolina State University

Box 7204

Raleigh, NC 27695

Account Number:

23844

Reason for Refund:

Taxpayer's payment was applied to account 31838 in error. Taxpayer paid

account 23844 in full. Taxpayer is requesting a refund. Payment was made by

N.C. State University with check number 3853559.

Property Description:

Parcel:

Green Road SR 1317

4570-03-5533-00

Property Description:

Off Green Road

Parcel:

4570-01-8588-00

Tax Period:

2015

Tax Code(s) for Refund

Amount

G-01 104.64

Total Refund:

104.64

Date:

February 29, 2016

Taxpayer(s):

Nettie Jarman

Refund To:

Jones County Tax Collector

PO Box 87

Trenton, NC 28585

Account Number:

777

Reason for Refund:

Taxpayer was charged deferred taxes in error for 2011, 2012 and 2013. Taxpayer's son Christopher Jarman has requested a refund be issued. Refund check needs to be

sent to the Jones County Tax Collector to cover past due taxes.

**Property Description:** 

SR 1321

Parcel Number:

5409-15-3122-00

Tax Period:

2011 2012 2013

Tax Code(s) for Refund:

G01 G01

G01

Refund by Tax Code:

\$

332.93 \$ 359.92 \$

359.92

Total Refund:

\$ 1,052.77

Date:

March 7, 2016

Taxpayer(s):

Trustees of Lanies Chapel Christian Church

Refund To:

Lanie's Chapel Christian Church

5333 Hwy 58 North Kinston, NC 28504

Account Number:

26753

Reason for Refund:

Taxpayer was charged property tax in error. Lanie's Chapel

applied and was approved for religious exemption in 2006. G.S. 105-381 (a)(3) allowes for a refund on tax paid within

five years of due date.

Property Description:

SR 1157

Parcel Number:

4540-32-2167-00

Tax Period:

2014 2013 2012 2011

Tax Code(s) for Refund:

G-01 G-01

G-01

G-01

Refund by Tax Code:

\$

147.75 \$ 35.09 \$

34.15 \$ 32.46

Total Refund:

\$ 249.45

Date:

March 11, 2016

Taxpayer(s):

Edna Smith

Refund To:

Edna Smith

121 Rabbit Hill Lane Pollocksville, NC 28573

Account Number:

9193

Reason for Refund:

Taxpayer was billed in error for a 1973 Lanc. Boat

Taxpayer paid bill and is now requesting a refund.

Property Description:

Bill Number:

1973 Lanc. Boat

15A9193.02.1

Tax Period:

2015

Tax Code(s) for Refund	Amount	
G-01 <sup>°</sup>	3.95	
G-01 Penalty	0.40	
G-01 Interest	0.09	
F-02	0.15	
F-02 Penalty	0.02	
F-02 Interest	-	

Total Refund:

4.61

Date:

March 11, 2016

Taxpayer(s):

Elma Darlene Smith

Refund To:

Elma Darlene Smith

PO Box 225

Pink Hill, NC 28572

Account Number:

34633

Reason for Refund:

Taxpayer was billed two times for mobile home. Taxpayer paid both bills.

Taxpayer is requesting a refund on account # 34633.

Property Description:

Bill Number:

Mobile Home

15A34633.05

Tax Period:

2015

Tax Code(s) for Refund	Amount
G-01	18.80
G-01 Interest	0.38
F-05	0.71
F-05 Interest	
	1051

Total Refund:

Date:

March 11, 2016

Taxpayer(s):

Elvin Lee Jr.

Refund To:

Elvin Lee Jr.

PO Box 213

Trenton, NC 28585

Account Number:

892

Reason for Refund:

Taxpayer was billed in error on \$224,465 in value. Taxpayer was

charged for equipment and machinery owned by Dennis Lee.

Taxpayer should have been billed on \$28,663 value.

**Property Description:** 

Machinery and Equipment

Bill Number:

15A892.03

\$

Value Change

195,802

Tax Period:

2015

Tax Code(s) for Refund

Amount 1,546.84

G-01 F-03

58.74

Total Refund:

\$ 1,605.58

Commissioners' Minutes

March 21, 2016

Book 12 Page 371

/

EXHIBIT D

**Budget Amendment** 

Date:

3/21/2016

Fund:

General Fund

Fiscal Year:

2015-2016

Amendment #6

**Derease Expenditures** 

Administration

Capital under \$5000

11-4120-5500-00

1,005.00

**Total Decrease in Expenditures** 

1,005.00

Increase Expenditures

Finance

Capital under \$5000

11-4130-5500-00

1,005.00

Total Increase in Expenditures

1,005.00

Chairman

County Manager

Clerk to the Board

Finance Officer

To cover the Finance Computer before it went out.

# **Budget Amendment**

Date:	3/21/2016		
Fund:	General Fund		
Fiscal Year:	2015-2016	Amendment #7	
Decrease Expenditures			
Bioterrorism/PHP&R	Salaries	11-5189-5121-00	9,121.00
	FICA	11-5189-5181-00	698.00
	Retirement	11-5189-5182-00	620.00
	Hospitalization	11-5189-5183-00	1,100.00
	Vehicles - Fuel & Oil	11-5189-5251-00	150.00
	Office Supplies	11-5189-5260-00	13.00
	Miscellaneous	11-5189-5299-00	5,000.00
	Mileage	11-5189-5311-00	250.00
	Workers Comp Insurance	11-5189-5458-00	51.00
	Registration	11-5189-5493-00	100.00
	Fund Balance	11-0991-4991-00	2,897.00
Total Decrease in Expenditures			20,000.00
Increase Expenditures			
Ebola Preparation & Response	Salaries	11-5178-5121-00	9,121.00
	FICA	11-5178-5181-00	698.00
	Retirement	11-5178-5182-00	620.00
	Hospitalization	11-5178-5183-00	1,100.00
	Mileage	11-5178-5311-00	360.00
	Education & Training	11-5178-5395-01	250.00
	Workers Comp Insurance	11-5178-5458-00	51.00
	Minor Equipment	11-5178-5499-00	1,800.00
	Capital Items under \$5000	11-5178-5500-00	6,000.00
Total Increase in Expenditures			20,000.00
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County Manager

Chairman

Clerk to the Board

Finance Officer

**Budget Amendment** 

Date:

3/21/2016

Fund:

General Fund

Fiscal Year:

2015-2016

Amendment #8

**Decrease Expenditures** 

Register of Deeds

Lease Purchase/Computer Eq

11-4180-5512-00

4,000.00

Administration

Capital under \$5000

11-4180-5500-00

500.00

Total Decrease in Expenditures

4,500.00

Increase Expenditures

Register of Deeds

Capital under \$5000

11-4180-5500-00

4,500.00

Total Increase in Expenditures

4,500.00

Chairman

County Mahager

Clerk to the Board

Finance Officer

New Copier - Purchased instead of leased.

/

#### **Budget Amendment**

Date:

3/21/2016

Fund:

**General Fund** 

Fiscal Year:

2015-2016

Amendment #9

Increase Revenue

SHIIP Grant - Extension

SHIIP Grant

11-0213-4584-02

3,467.00

Total Decrease in Expenditures

3,467.00

**Increase Expenditures** 

Extension

SHIIP Grant

11-4950-5477-01

3,467.00

**Total Increase in Expenditures** 

3,467.00

Chairman

County Manager

Clerk to the Board

Finance Officer

Adding SHIP finds received.

Date:

3/21/2016

Fund:

General Fund

Fiscal Year:

2015-2016

Amendment #10

**Decrease Expenditures** 

Soil Conservation

Education

11-4960-5395-00

500.00

Total Decrease in Expenditures

500.00

**Increase Expenditures** 

Soil Conservation

Dues

11-4960-5491-00

500.00

Total Increase in Expenditures

500.00

Chairman

County Mahager

Clerk to the Board

Finance Officer

Move from Education to Dues

/

Date:

3/21/2016

Fund:

General Fund

Fiscal Year:

2015-2016

Amendment #11

Increase Revenues

HIV/STD

HIV/STD State

11-0211-4519-05

2,000.00

**Total Increase in Revenues** 

2,000.00

**Decrease Expenditures** 

HIV/STD

Supplies - Janitorial

11-5190-5211-00

201.00

**Total Decrease in Expenditures** 

201.00

**Increase Expenditures** 

HIV/STD

Supplies - Medical Education and Training

11-5190-5239-00 11-5190-5395-01 2,001.00

Total Increase in Expenditures

2,201.00

Chairman

County Manager

Clerk to the Board

Date:	3/21/2016		
Fund:	General Fund		
Fiscal Year:	2015-2016	Amendment #12	
Decrease Expenditures			
WIC Program	Salaries	11-5167-5121-00	18,423.00
	FICA	11-5167-5181-00	415.00
	Retirement	11-5167-5182-00	370.00
	Hospitalization	11-5167-5183-00	950.00
	Supplies - Office	11-5167-5260-00	100.00
	Workers Comp Insurance	11-5167-5458-00	30.00
Total Decrease in Expenditures	į- 110 d. 1100	11 310/ 3430-00	20,288.00
			20,286.00
Increase Expenditures			
Breastfeeding Peer Counselor	Salaries	11-5154-5121-00	5,451.00
	FICA	11-5154-5181-00	417.00
	Retirement	11-5154-5182-00	371.00
	Hospitalization	11-5154-5183-00	950.00
	Supplies - Office	11-5154-5260-00	100.00
<u></u>	Mileage	11-5154-5311-00	682.00
	Workers Comp Insurance	11-5154-5458-00	29.00
	Total BFPC		8,000.00
WIC Program	Salaries - Part time	11-5167-5126-00	10,511.00
	Supplies - Medical	11-5167-5239-00	400.00
	Miscellaneous	11-5167-5299-00	77.00
	Mileage	11-5167-5311-00	1,300.00
	Total - WIC		12,288.00
Total Increase in Expenditures	,		20,288.00
Huch Ka	Due-		15,255.65
Chairman			
Jung Haward			
County Manager			
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Date: Fund: Fiscal Year:	3/21/2016 General Fund 2015-2016	Amendment #13	
Decrease Expenditures			
Child Health	Supplies - Office	11-5161-5260-00	5,876.00
	Postage	11-5161-5325-00	300.00
	Printing	11-5161-5341-00	300.00
	Advertisements	11-5161-5391-00	1,542.00
	Contract Services	11-5161-5440-13	1,875.00
Total Decrease in Expenditures			9,893.00
Increase Expenditures			
Child Health	Salaries	11-5161-5121-00	482.00
	FICA	11-5161-5181-00	37.00
	Retirement	11-5161-5182-00	33.00
	Hospitalization	11-5161-5183-00	100.00
	Supplies - Medical Records	11-5161-5239-01	300.00
	Mileage	11-5161-5311-00	1,310.00
	Workers Comp Insurance	11-5161-5458-00	2.00
	Registration	11-5161-5493-00	1,974.00
	Capital Items under \$5000	11-5161-5500-00	5,655.00
Total Increase in Expenditures			9,893.00

Chairman

County Manager

Clark to the Board

Date:

3/21/2016

Fund:

General Fund

Fiscal Year:

2015-2016

Amendment #14

**Increase** Revenues

CC4C

CC4C - Medicaid

11-0211-4516-05

7,133.25

Total Increase in Revenues

7,133.25

**Increase Expenditures** 

CC4C

**Contract Services** 

Cell Phone

11-5163-5440-13 11-5163-5322-00

6,833.25 300.00

Total Increase in Expenditures

7,133.25

Chairman

County Manager

Clerk to the Board

Finance Officer

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Date:

3/21/2016

Fund:

General Fund

Fiscal Year:

2015-2016

Amendment #15

#### **Increase Revenues**

**BCCCP** 

BCCCP - State

11-0211-4519-09

1,275.00

Total Increase in Revenues

1,275.00

### **Increase Expenditures**

R	C	C	C	Р
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Salaries	11-5152-5121-00	650.00
FICA	11-5152-5181-00	50.00
Retirement	11-5152-5182-00	46.00
Hospitalization	11-5152-5183-00	69.00
Professional Lab Services	11-5152-5193-07	200.00
Mileage	11-5152-5311-00	260.00

Total Increase in Expenditures

1,275.00

Date:

3/21/2016

Fund:

General Fund

Fiscal Year:

2015-2016

Amendment #16

### **Increase Revenues**

Healthy	Communities
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Health Promotion - State

11-0211-4519-07

4,160.00

Total Increase in Revenues

4,160.00

### **Increase Expenditures**

Healthy	Comm	unities
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Supplies & Materials	11-5151-5260-02	2 800 00
Mileage	11-5151-5311-00	2,800.00
Advertising	11-5151-5391-00	500.00
Education & Training	11-5151-5395-03	550.00
Registration		170.00
-0.24.44.011	11-5151-5493-00	140.00

Total Increase in Expenditures

4,160.00

Chairman

County Manager

Clerk to the Board

Finance Officer

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Date:

3/21/2016

Fund:

General Fund

Fiscal Year:

2015-2016

Registration

Amendment #17

**Increase Revenues** 

MCH Planning Grant

MCH Grant - State

11-0211-4516-09

11-5159-5395-01

20,000.00

**Total Increase in Revenues** 

20,000.00

**Increase Expenditures** 

MCH Planning Grant

Salaries	11-5159-5121-00	6,000.00
FICA	11-5159-5181-00	460.00
Retirement	11-5159-5182-00	410.00
Hospitalization	11-5159-5183-00	1,000.00
Supplies & Materials	11-5159-5260-02	10,000.00
Mileage	11-5159-5311-00	1,030.00
Advertising	11-5159-5391-00	600.00

Total Increase in Expenditures

20,000.00

500.00

Clerk to the Board

3/21/2016

Fund:

General Fund

Fiscal Year:

2015-2016

Amendment #18

**Increase Revenues** 

Food & Lodging

Food & Lodging - State

11-0211-4518-01

2,437.00

Total Increase in Revenues

2,437.00

**Increase Expenditures** 

Food & Lodging

Salaries Part-time

11-5181-5126-00

1,860.00

**FICA Contract Services** 

11-5181-5181-00 11-5181-5440-13

140.00 437.00

Total Increase in Expenditures

2,437.00

Date:

3/21/2016

Fund:

General Fund

Fiscal Year:

2015-2016

Amendment #19

**Decrease Expenditures** 

PCM Program

Mileage

11-5165-5311-00

300.00

**Total Decrease in Expenditures** 

300.00

**Increase Expenditures** 

**PCM** 

Cell Phone

11-5165-5322-00

300.00

**Total Increase in Expenditures** 

300.00

Chairman

County Manager

Clerk to the Board

Commissioners' Minutes

March 21, 2016

Book 12 Page 385

### **Budget Amendment**

Date:

3/21/2016

Fund:

General Fund

Fiscal Year:

2015-2016

Amendment #20

**Decrease Expenditures** 

**Healthy Communities** 

Salaries

11-5151-5121-00

1,755.90

**Total Decrease in Expenditures** 

1,755.90

Increase Expenditures

**Healthy Communities** 

Salaries - Part time

11-5151-5126-00

1,755.90

Total Increase in Expenditures

1,755.90

Chairman

County Manage

Clerk to the Board

Finance Officer

/

Date:

3/21/2016

Fund:

General Fund

Fiscal Year:

2015-2016

Amendment #21

**Decrease Expenditures** 

**Healthy Communities** 

Mileage

11-5180-5311-00

500.00

**Total Decrease in Expenditures** 

500.00

**Increase Expenditures** 

**Environmental Health** 

Supplies & Materails

11-5180-5260-02

500.00

**Total Increase in Expenditures** 

500.00

Chairman

County Manager

Clerk to the Board

Date:

3/21/2016

Fund:

General Fund

Fiscal Year:

2015-2016

Amendment #22

#### **Decrease Revenues**

DHHS/DPH
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Maternal Health (HMHC)

11-0211-4516-00

1,221.00

**Total Decrease in Revenues** 

1,221.00

### **Decrease Expenditures**

Materna	l Health
---------	----------

Salaries	
EICA	

Hospitalization

11-5160-5121-00 11-5160-5181-00

975.00 75.00

Retirement

11-5160-5182-00 11-5160-5183-00

66.00 105.00

Total Decrease in Expenditures

1,221.00

Chairman

County Manager

Clerk to the Board

Date:

3/21/2016

Fund:

General Fund

Fiscal Year:

2015-2016

Amendment #23

#### **Decrease Revenues**

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1 1	m	_	~	111	,,	п

Family Planning (HMHC)

11-0211-4516-06

1,460.00

**Total Decrease in Revenues** 

1,460.00

#### **Decrease Expenditures**

Family Plannii	ng
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Sa	laries	
FIC	`Δ	

Hospitalization

11-5164-5181-0	0
11-5164-5182-0	0

11-5164-5121-00

1,100.00 85.00

Retirement

11-5164-5182-00 11-5164-5183-00 75.00 200.00

Total Decrease in Expenditures

1,460.00

Chairman

County Manager

Clerk to the Board

# Commissioners' Minutes

### **Budget Amendment**

Date:

3/21/2016

Fund:

General Fund

Fiscal Year:

2015-2016

Amendment #24

### **Decrease Expenditures**

Maternal Health	Mileage	11-5160-5311-00	76.67
Family Planning	Mileage	11-5164-5311-00	100.00
Family Planning	Printing	11-5164-5341-00	100.00
Total Decrease in Expenditures	11-2104-2241-00	276.67	

### **Increase Expenditures**

Maternal Health Family Planning Family Planning Total Increase in Expenditures	License Renewal	11-5160-5498-00	76.67
	Contract Interpreter	11-5164-5440-21	123.33
	License Renewal	11-5164-5498.00	76.67
rotal mercase in Expenditures			276.67

Clerk to the Board

April 4, 2016 8:30 A.M.
JONES COUNTY BOARD OF COMMISSIONERS
REGULAR MEETING
JONES COUNTY AGRICULTURAL BUILDING, 110 MARKET STREET
TRENTON, NC 28585
MINUTES

#### **COMMISSIONERS PRESENT:**

Zack Koonce, Chairperson Frank Emory, Vice-Chairperson Mike Haddock, Commissioner Joseph Wiggins, Commissioner Sondra Ipock-Riggs, Commissioner

#### **OFFICIALS PRESENT:**

Franky J. Howard, County Manager Angelica Hall, Clerk

#### **COMMISSIONERS ABSENT:**

The Chairperson called the meeting to order. Commissioner Frank Emory gave the invocation. **MOTION** was made by Commissioner Frank Emory, seconded by Commissioner Mike Haddock, and unanimously carried **THAT** the agenda be **APPROVED** with the following additions:

- 7. Board of Equalization and Review
- 8. President Washington's 1791 Southern Tour 225th Anniversary Proclamation

**MOTION** made by Commissioner Joseph Wiggins, seconded by Commissioner Sondra Ipock-Riggs, and unanimously carried **THAT** the minutes for Regular Meeting on March 21, 2016 be **APPROVED**.

#### **PUBLIC COMMENT PERIOD:**

No Comment

#### 1. HEALTH BOARD APPOINTMENTS

Wesley Smith, Health Director, presented the Board with three individuals for initial appointments to the Board of Health, that were recommended by the Board of Health at their March 24th meeting. Dr. Steve Stelma, Veterinarian will be replacing Dr. Don Campbell, Myron Meadows, Engineer will be replacing John Eddy and Rev. Charles Dunn, ILO Optometrist which is currently vacant. The initial appointments are for three years, and will expire in April of 2019. According to NC GS 130A-35, members of a county Board of Health shall be appointed by the county Board of Commissioners. MOTION made by Commissioner Joseph Wiggins seconded by Commissioner Sondra Ipock-Riggs and unanimously carried THAT the Health Board's recommendations for appointment to the Health Board be APPROVED as presented.

#### 2. CAPITAL REQUEST-DRUG TAKE BACK BOX

Amy Carter, Public Health Educator II, presented the Board with a request to approve the purchase of one MedReturn Drug Collection Unit for permanent installation at Maysville Police Department. The Health Department will be using FY 15/16 Healthy Communities funding to purchase the Drug Collection Unit. The Drug Collection Unit will be used to collect unwanted or expired prescription, over-the-counter and other unused household medications.